

COMMONWEALTH NEUROTRAUMA INITIATIVE (CNI) TRUST FUND

TRIENNIAL REPORT

For State Fiscal Years 2015, 2016, 2017
(July 1, 2014 through June 30, 2017)

The Code of Virginia Section 51.5-12.3(C)(4), amended in 2008 by Senate Bill 494, changed the requirement for the Commonwealth Neurotrauma Initiative (CNI) Trust Fund to submit an annual report to "...report triennially on October 1, to the Governor and the General Assembly, aggregate data on the operations and funding of the . . . [CNI Trust Fund]." The information contained herein constitutes the October 1, 2017 CNI Triennial Report for State Fiscal Years 2015, 2016, and 2017.

Background / Purpose

On July 1, 1997, Senate Bill (SB) 1132 created the Commonwealth Neurotrauma Initiative (CNI) in the Code of Virginia. SB 1132 authorized the CNI Trust Fund as a special non-reverting fund, and also established the CNI Advisory Board, a permanent collegial body affiliated with the State Board of Health (2004 legislation transferred administrative authority from the Virginia Department of Health to the Virginia Department for Aging and Rehabilitative Services). Effective July 1, 1998, Senate Bill (SB) 484 provided that (i) moneys in the CNI Trust Fund "shall be used solely to support grants for Virginia-based organizations, institutions, and researchers" and (ii) "fifty percent [of the moneys in the Fund] shall be allocated for research on the mechanisms and treatment of neurotrauma [referred to as *Option A*] and fifty percent shall be allocated for rehabilitative programs / services [referred to as *Option B*]."

The 1998 SB 484 legislation also created a mechanism for funding the CNI. Moneys are deposited into the Trust Fund pursuant to §18.2-271.1 (E) of the Code of Virginia. If an individual's privilege to drive is suspended, revoked, or disqualified, Virginia law (§§ 46.2-411, 18.2-271.1E, 46.2-333.1) requires the payment of the highest applicable fee to the Department of Motor Vehicles (DMV) prior to reinstatement of driving privileges. Currently, DMV license reinstatement fees – as relevant to the CNI Trust Fund - may be \$175 or \$220, depending on the type of suspension, revocation, or disqualification. In either case, the amount of \$25 of the total reinstatement fee "shall be transferred to the [CNI] Trust Fund." (The Code was subsequently amended to allow up to 5% of the total Fund amount per year to be used for administrative costs, changing the allocations to 47.5% each for *Option A* and *Option B* grants.)

Program Administration

As the result of a statutory Code change in 2004, responsibility for the Commonwealth Neurotrauma Initiative (CNI) Trust Fund was transferred from the Department of Health to the Department for Aging and Rehabilitative Services (DARS). DARS provides staffing of the Governor-appointed Advisory Board, as well as management of the CNI Trust Fund Grants Program.

In Fiscal Year 2014 and Fiscal Year, based on minimal active grant activity and to conserve funding, DARS chose not to fill the vacated full-time Program Specialist position when the person resigned in 2014; instead, the role was shared by internal DARS staff during a period of time in 2014 and 2015. In 2016, the Program Specialist position was filled by a full-time staff person. The Manager of the DARS Brain Injury Services Coordination Unit provides supervisory oversight for the operation and management of the CNI Trust Fund program (15% of her time is allocated as in-kind), and an Administrative and Fiscal specialist provides fiscal support to the Fund on an as needed basis.

Board Management

Per the Code of Virginia (§51.5-12.3), the Commonwealth Neurotrauma Initiative (CNI) Advisory Board consists of seven governor-appointed members. With the exception of the commissioners of the Department of Health and the Department for Aging and Rehabilitative Services, who have no term limits and may appoint designees, members are appointed to four-year terms according to the following categories:

1. One person licensed to practice medicine in Virginia experienced with brain or spinal cord injury
2. One person licensed by a health regulatory board within the Department of Health Professions with experience in brain or spinal cord injury rehabilitative programs or services
3. One Virginian with traumatic spinal cord injury or a caretaker thereof
4. One Virginian with traumatic brain injury or a caretaker thereof
5. One citizen-at-large who shall not be an elected or appointed public official
6. *The Commissioner of the Department for Aging and Rehabilitative Services (or designee) [serves in ex-officio role]
7. *The State Health Commissioner (or designee)

**The Commissioner of the Virginia Department for Aging and Rehabilitative Services and the Commissioner of the Virginia Department Health may appoint designees to serve on the Advisory Board.*

The only officer of the Advisory Board is the Chair. The bylaws were revised in 2011 to extend the Chair's term from one to two years, allowing for enhanced efficiency and to accommodate the learning curve of an individual who assumes the role of chair. In June 2014, David X. Cifu, M.D. of Richmond, was elected as the new Chair for a term of two years. Per the bylaws of the Advisory Board, the Chair is eligible for re-election and in March 2016, Dr. Cifu was re-elected for an additional two-year term. Current members and their terms are:

David X. Cifu, M.D., Chair (#1, see member category above)
Richmond, VA
July 2016 – June 2020 (2nd Term as chair expires 2018; 2nd Term as member expires 2020)

David Reid, Psy.D. (#2, see member category above)
Charlottesville, VA 22902
July 2017 – June 2021 (2nd Term)

Scott Dickens (#3, see above)
Richmond, VA
July 2017 – June 2021 (2nd Term)

Raighne “Renny” Delaney, Esq. (#4, see member category above)
Arlington, VA
July 2016 – June 2020 (1st Term)

Patrik Sandas, Ph.D. (#5, see member category above)
Charlottesville, VA
July 2017 – June 2021 (2nd Term)

James Rothrock, M.A., LPC (#6, see member category above)
Commissioner, Virginia Department for Aging and Rehabilitative Services
Henrico, VA

Heather Board, M.P.H. (#7, see member category above)
Commissioner's Designee, Virginia Department of Health
Richmond, VA
Standing Member

Due to declining revenue which resulted in an unusually modest funding portfolio during the three years of this reporting period, as well as unanticipated changes in administrative staff, the Board experienced a rather quiet period from 2015 through 2017. As the Fund's cash reserve grew, the Board's activities began to increase, as noted below.

State Fiscal Year 2015 (July 1, 2014 – June 30, 2015): In FY '15, the Commonwealth Neurotrauma Initiative (CNI) Trust Fund Advisory Board held two of four scheduled quarterly business meetings. Due to declining revenues, minimal active grant activity, and no substantive business to address, only two meetings were held with the agreement of the Chair and DARS. During the two FY '15 meetings, Board members received updates on past grantees and reviewed fiscal status of the Fund, with discussions centering on whether and when to release a Request For Proposals (RFP) and, if so, how many grants could responsibly be funded. During one of the meetings, DARS arranged for Alan Gernhardt from the Division of Legislative Services (DLS) to provide an overview of the Virginia Freedom of Information Act (FOIA) as it relates to public bodies.

In FY '15, the Virginia Department of Health's Commissioner Designee appointment held by Douglas Harris, JD, since the inception of the Fund, was transferred to Heather Funkhouser Board. No other Board member changes were noted.

State Fiscal Year 2016 (July 1, 2015 through June 30, 2017): In FY'16, the Advisory Board held one of four scheduled quarterly meetings, due to scheduling challenges (involving the availability of the chair or the ability to have a quorum). At that meeting, Cynthia O'Donoghue, Ph.D. and Cara Meixner, Ph.D. of James Madison University (JMU) presented the results of their CNI-funded report, "*Report on Access to Neurobehavioral Services in Virginia.*"

In FY'16, two board member terms expired as of June 30, 2016. Rosemary Rawlins who filled the slot for "*One Virginian with a traumatic brain injury or caretaker thereof*" was eligible for reappointment, but she had moved out of state and was no longer eligible to serve on the Board. This position was filled by Raighne "Renny" Delaney, Esq. The second open position was "*One person licensed to practice medicine in Virginia experienced with brain or spinal cord injury*" which had been filled by Laurie Lindblom, M.D., who did not request reappointment. This position was filled by David Cifu, M.D.

State Fiscal Year 2017 (July 1, 2016 – June 30, 2017): In FY '17, the Advisory Board held three of four scheduled quarterly business meetings. The Chair was unable to attend the scheduled meeting in December and staff suggested moving it to January. The scheduled March meeting was then cancelled due to the close proximity of the recently held January meeting and in light of the fact that an all-day meeting would be required later in the year. A Request For Proposals (RFP) had been issued, and staff advised the Board that it would need to schedule an all-day meeting in July to allow time for the review and rating of the proposals. An all-day meeting with a working lunch was held in July to allow Board members to review, evaluate, and recommend funding from among 14 proposals submitted under RFP #17-002. The Board is now back to regularly scheduled quarterly meetings, which have been moved to Fridays, a more convenient day of the week for members to meet.

In FY'17, Dr. David Cifu was appointed to the position vacated by Board Member Laurie Lindblom "*One person licensed to practice medicine in Virginia experienced with brain or spinal cord injury*" for his second term on beginning on July 1, 2016 ending June 30, 2020. Dr. Cifu still had one year remaining in his term as "*one person licensed by a health regulatory board within the Department of Health Professions with experience in brain or spinal cord injury rehabilitative program or services*". Dr. David Reid was appointed to fill the remainder of Dr. Cifu's term beginning July 2016-June 2017. The "*Virginian with a traumatic brain injury or caretaker thereof*" Board position vacated by Rosemary Rawlins was filled in July 2016. Raighne C. "Renny" Delaney, Esq. was appointed for a 4-year term to begin July 1, 2016 through June 30, 2020.

Three Board member positions expired as of June 30, 2017, all eligible for reappointment: 1) *One person licensed by a health regulatory board within the Department of Health Professions with experience in brain or spinal cord injury rehabilitative programs or services*; 2) *One Virginian with traumatic spinal cord injury or a caretaker thereof* and 3) *One citizen-at-large who shall not be an elected or appointed public official*. All sitting members - David Reid, Psy.D., Patrik Sandas, Ph.D., and Scott Dickens - requested re-appointment for four more years.

Fiscal Status

Note: Detailed financial reports for each of the years in this Triennial Report are available on the CNI Trust Fund website at www.cni.org or from DARS staff.)

The CNI Trust Fund consists of grants, donations, and bequests from public or private sources and funds collected as provided in §46.2-411 of the Code of Virginia. Moneys have been collected and deposited into the CNI Trust Fund since 1998, when a citizen donated \$25 to the Fund. The funding mechanism for CNI – designated by Code as \$25, a portion of the total reinstatement fee charged to restore an operator's license that is revoked or suspended for specified dangerous driving offenses - was established by legislation in 1998, a year after the Trust Fund and the Advisory Board were established in the Code of Virginia. The CNI Trust Fund is a special non-reverting fund in the state treasury.

In addition to revenue coming into the Fund via the reinstatement fee noted in the above paragraph, the Fund receives interest revenue (although this has been sporadic since inception and was discontinued for a while when the State Treasurer claimed the interest, it has since been returned to the Fund for two of the three years during this reporting period). The Code also allows the administrative entity to access up to 5% of the total amount in the Fund for administrative costs related to staffing, managing the grants process, and hosting periodic research colloquia as feasible.

Fee Revenue. The revenue in Fiscal Year 2015 (FY '15) averaged \$78,330 per month, resulting in **\$939,700 for the year**; in FY'16 it averaged \$75,823 per month, or **\$909,884 for the year**; and in FY'17 it averaged \$68,865 per month, or **\$826,375 for the year**. Historically the revenue coming into the Fund has been relatively stable since it was established; however, the Fund began to see a slow, but steady monthly decline in revenue starting in FY '11, and that has continued through this reporting period. **TOTAL: \$2,675,959.**

Interest Revenue. In FY' 16 the Fund received interest in the amount of \$11,557, and \$13,690 in FY' 17. **TOTAL: \$25,247.**

Administrative Staff / Expenses. In FY'15, staff and other administrative expenditures totaled \$45,270; in FY '16, expenditures were only \$31,742; and in FY '17, administrative costs were back to normal at about \$73,408 for the year. A full-time program specialist position was filled on July 1, 2016 bringing the averages back in line with previous years. **TOTAL: \$150,420.**

Grant Funding / Activity

Due to previously declining revenues, the Fund had only two active community-based grants in Fiscal Year (FY) 2015. In FY '16, the Fund had no active grants. In FY '17, the Fund issued Request For Proposals (RFP) #17-002 and a total of five (5) grants were funded under the RFP and under Commissioner's Authority. A budget amendment (Item 349#3c) was passed during 2004 General Assembly that empowers the Commissioner of the Department of Rehabilitative Services (DRS) to redistribute unspent grant funds from prior years for new

research activities (“... *reallocate up to \$500,000 from unexpended balances in the Commonwealth Neurotrauma Initiative Trust Fund to fund new grant awards for research on traumatic brain and spinal cord injuries.*”).

State Fiscal Year 2015 (July 1, 2014 – June 30, 2015): In FY’15, the average monthly revenue for the year was \$78,308. The Board determined that it would allow the Fund to build its reserve back up and would not issue a Requests For Proposals (RFP). The Fund had only two active grants during this Fiscal Year:

During State Fiscal Year (SFY) 2015, the CNI Advisory Board awarded a one-year \$125,000 grant under Commissioner’s Authority to James Madison University (JMU) for completion of a study entitled, *Access to Neurobehavioral Services in Virginia* (<http://www.vadars.org/vbic.asp#paper>). This project, which ran June 1, 2014 through May 30, 2015, resulted in a comprehensive reference document and also served as a required state match for the first year of DARS’ Federal Traumatic Brain Injury (TBI) Grant from the Department of Health and Human Services. This state cash match grant allowed the Commonwealth of Virginia to draw down \$250,000 in federal funds for year one of DARS’ 2014-18 federal Traumatic Brain Injury State Grant.

At the close of FY’15, a no cost extension was granted to Brain Injury Services, Inc. through June 30, 2015 for their project (CONcEPT: The Commonwealth Neurobehavioral Project Team) originally funded at \$150,000 for the one-year period from November 1, 2013 through October 31, 2014. CONcEPT also served as a one-year state cash match to DARS’ federal (TBI) State Grant (allowing drawdown of federal dollars to the Commonwealth of Virginia in the amount of \$270,000). CONcEPT was designed to increase access to critical interdisciplinary team supports for persons with brain injury who have neurobehavioral issues. The grant maximized participants’ independence and productivity in the community.

State Fiscal Year 2016 (July 1, 2015 through June 30, 2017): In FY’16, there was a slight decrease in revenue; the average monthly revenue for the year was \$75,824. The Fund also received interest of \$11,557 during FY’16.

During SFY 2016, the Board also approved, under Commissioner’s Authority, a state cash match grant for years two through four of DARS’ federal 2014-18 TBI State Grant: a three-year grant in the amount of \$375,000 (\$125,000 / year) to the University of Virginia (UVA). The project is entitled, “*Community-Based Brain Injury Screening Initiative*” which involves implementation of a screening tool by non-brain injury professionals in eight community sites.

State Fiscal Year 2017 (July 1, 2016 – June 30, 2017): In FY’17, revenue continued to decrease; the average monthly revenue for the year was \$68,865. The Fund also received interest of \$13,690 during FY ’17. In addition, the Fund received repayment of a DARS loan in the amount of \$600,000 which contributed to a healthy balance and the Board’s decision to fund new projects. Due to accumulated funds available, the Board felt it could responsibly issue a Request For Proposals (RFP).

In FY'17, the CNI Trust Fund issued Request For Proposals (RFP) #17-002 soliciting applications for *Option-A, Research on the Mechanisms and Treatment of Neurotrauma*. Fourteen (14) proposals were submitted, scored by external (out of state) expert reviewers, and returned to the CNI Advisory Board with recommendations for funding. **The Board funded four (4) projects, effective April 1, 2017, totaling \$1,639,859 over a three-year period:**

- Virginia Commonwealth University, Principal Investigator (PI): Alex Valadka, MD; *“Comparative Evaluation of Mannitol and Hypertonic Saline in the Treatment of Experimental Traumatic Brain Injury.”* This proposal will compare effects of mannitol and HTS at different concentrations on intracranial pressure (ICP), brain water content, inflammation, and early neuronal cell death immediately after experimental TBI. This study will also compare neuroprotective properties of mannitol and different concentration of HTS by determining functional recoveries and brain tissue preservation after experimental TBI. *(Two years of funding totaling \$292,336.)*
- Virginia Commonwealth University, PI: Kristy Dixon, PhD; *“PAIN-T Alleviation Immediately after Neurotrauma Mediated via TNFR1.”* This project will build on preliminary data by examining that extent of injury-induced hippocampal plasticity and its association with the development of pain, and determine whether this is TNFR1-mediated. This proposal will also build on preliminary data by examining the mechanism as to how TNF induces hippocampal plasticity. The study will assess the efficacy of XPro1595 to alleviate pain and comorbid behaviors in mice following brain injury. *(Three years of funding totaling \$450,000.)*
- McGuire Research Institute Inc., PI: George Gitchel, PhD; *“Targeted Transcranial Magnetic Stimulation for Cognitive Rehabilitation after Traumatic Brain Injury.”* McGuire Research Institute will assess efficacy of right frontal rTMS for cognitive rehabilitation of attention and learning after TBI. In the short-term, this study is expected to provide needed information on the efficacy of a potential treatment for TBI-related cognitive dysfunction and encourage larger trials to be conducted. *(Three years of funding totaling \$449,104.)*
- Community Brain Injury Services, PI: Jason Young, MSW; *“Evaluating Brain Injury Clubhouses and the Effect on Neurobehavioral Functioning and Participation.”* Community Brain Injury Services (CBIS) will implement a program level data collection system to standardize data regarding the injury and sociodemographic characteristics of people served in Virginia’s clubhouse model programs, including the level and duration of services provided, and outcomes achieved. This project was funded under the Commissioner’s Authority. *(Three years of funding totaling \$448,419.)*

The Board also voted in FY 2017 to release a Request for Proposals (RFP) for *Option B: Community Based Program/Services* in early 2018. Based on fiscal analysis and projection, it was determined that the Board will be able to fund up to four (4) grants under this RFP.

CNI Grant-Related Publications and Subsequent Funding

**Note: CNI Trust Fund staff maintains a cumulative list of publications, internet articles, gaming apps, and additional funding awarded to investigators based on original CNI projects. Further, some Principal Investigators may have reported on published articles or received funding outside the three-year scope of this report; that information is included in the cumulative list maintained by CNI staff.*

Articles:

Wu J, McKee K, McKee M, Meade M, Sen A, Plegue M. Contraceptive Use Among Women with Physical and Sensory Disabilities in the United States. *Perspectives on Sexual and Reproductive Health*. Accepted pending revisions.

Meade MA, Mahmoudi E, Lee, SY (2015). The Intersection of Disability and Healthcare Disparities: A Conceptual Framework. *Disability & Rehabilitation*. 37(7): 632–64.

Wu J, McKee K, McKee M, Meade M, Sen A (2017). Female sterilization is more common among women with physical and / or sensory disabilities than women without disabilities in the United States. *Disability and Health Journal*. Pre-publication online.

<http://www.sciencedirect.com/science/article/pii/S2214782914000219>

Internet interventions, Volume 1, Issue 3, July 2014, 149-157, Development and perceived utility and impact of a skin care Internet intervention; Lee Ritterband, et al.

Subsequent Funding Received Based on CNI Projects:

National Institute on Disability and Rehabilitation Research. University of Michigan Spinal Cord Injury Care System, Denise G. Tate, Ph.D., Principal Investigator. 10/2011 - 9/2016, Co-Investigator and Project Director for *Self-Management Research Intervention*; Director of *Dissemination from 20011-2013*; \$2,285,000 (5-year contract).



This CNI Trust Fund Triennial Report for State Fiscal Years 2015, 2016, and 2017, along with additional detailed information, can be found on the CNI website at www.vacni.org.